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APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORN	IEY DOCKET NO.
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	INTERV	IEW SUMMANT		
(1) M. Hartry	rt's representative, PTO personnel	(3)		
Type: Telephonic	eo Conference Personal (copy	vis given to ☐applicant ☐ar	oplicant's represent	ative).
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(A fuller description, if necessary, must be attached. Also, where no attached.)	and a copy of the amendments, if a copy of the amendments which we	available, which the examiner agr	eed would render t	he claims allowable nary thereof must be
☐ It is not necessary for applic	cant to provide a separate record of	f the substance of the interview.		
IS NOT WAIVED AND MUST INC	peen checked to indicate to the cor LUDE THE SUBSTANCE OF THE PPLICANT IS GIVEN ONE MONTH W.	INTERVIEW. (See MPEP Section	n 713.04). If a reply	to the last Office
Examiner Note: You must sign this	s form unless it is an attachment to	another form.	ed in	Stephe